

REPORT SURVEY		1. DATE OF SURVEY	2. TYPE OF REPORT	
			REQUIRED	PREPARED
3. PERSON TO CONTACT REGARDING REPORT	NAME	COMPONENT	ROOM NO. AND BLDG.	PHONE
4. REPORT TITLE				
5. AUTHORITIES OR DIRECTIVES REQUIRING THIS REPORT				
6. REPORTING FREQUENCY ( <i>Daily, weekly, monthly, as situations occur, etc.</i> )		7. REPORT FORMAT ( <i>Form no., memorandum, machine tabulation, etc.</i> )		
8. DATE REPORT IS DUE		9. NUMBER OF REPORTS RECEIVED/PREPARED ANNUALLY IF REPORT IS A "SITUATION" REPORT		
10. OFFICES OR ACTIVITIES REQUIRED TO SUBMIT THIS REPORT		11. DISTRIBUTION OF THIS REPORT ORIGINAL: COPIES:		
12. ESTIMATE OF THE NUMBER OF MAN HOURS REQUIRED TO PREPARE THIS REPORT ONE TIME. INCLUDE MAN HOURS REQUIRED AT ALL LEVELS TO MAINTAIN RECORDS, COLLECT DATA, PREPARE FEEDER REPORTS, AND COMPILE THE FINAL REPORT. . . . .				
13. COMPLETE THE FOLLOWING AS APPROPRIATE TO EITHER A "REQUIRED" OR "PREPARED" REPORT. OR BOTH. USING SPACE 14 IF NECESSARY.				YES NO
A. DOES THIS REPORT DUPLICATE IN WHOLE OR IN PART ANY OTHER REPORT? IF SO PLEASE EXPLAIN.				
B. IS THE INFORMATION REPORTED IN MORE DETAIL, SUBMITTED MORE FREQUENTLY, OR GIVEN WIDER DISTRIBUTION THAN IS CONSIDERED NECESSARY TO SERVE THE PURPOSES FOR WHICH THE REPORT WAS ESTABLISHED?				
C. IS THIS REPORT THE RESULT OF AN ADMINISTRATIVE OR PROCEDURAL PROBLEM WHICH SHOULD BE CORRECTED RATHER THAN REPORTED ON?				
D. COULD THE PURPOSES OF THIS REPORT BE SERVED BY DIRECT SUPERVISION OR INSPECTION, OR BY BRIEFINGS, STAFF MEETINGS, ETC.?				
E. HAS OFFICE ROUTINE EVER BEEN DISRUPTED OR HAS OVERTIME EVER BEEN REQUIRED TO MEET THE SUBMISSION DATE FOR THIS REPORT?				
F. DO YOU RECOMMEND THAT THE FORM OR FORMAT OF THIS REPORT BE REVISED WITH RESPECT TO:  (1) SPACING? . . . . .  (2) WEIGHT OF PAPER? . . . . .  (3) POSSIBLE ELIMINATION OF TRANSMITTAL CORRESPONDENCE? . . . . .				
G. IF THE REPORT IS REPRODUCED BY MINEOGRAPH, DITTO, MULTILITH, ETC., DO YOU RECOMMEND THE PROCUREMENT OF REPRODUCIBLE MASTERS WITH HEADINGS, LINES, ETC. PREPRINTED THEREON TO EXPEDITE PREPARATION OF THE REPORT?				
H. WOULD YOUR OFFICE DISCONTINUE:  (1) MAINTAINING . . . . .  (2) COMPILING . . . . .				
THE DATA AND INFORMATION SUBMITTED IN THIS REPORT ARE NOT TO BE USED FOR ANY OTHER PURPOSES UNLESS THE REQUIREMENTS FOR ITS SUBMISSION WERE RESCINDED?				

14. REMARKS (If you require this report, briefly state its purpose, and fully justify its continuance. State any contemplated use of the report. If the report was established. If you prepare this report, furnish a general opinion of its value. Cite any evidence or lack of evidence that the report is worth its cost. Recommend any improvements, including methods for preparing and submitting the report.)

☐ CONTINUED ON SEPARATE SHEET

REVIEW BY CHIEF OF COMPONENT

RECOMMENDATIONS

☐ CONTINUED ON SEPARATE SHEET

DATE

TITLE

SIGNATURE